



PTO/SB/22 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.**REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
FY 2006**

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)
SPINE 3.0-454

Application Number 10/782,982-Conf. #7133

Filed February 20, 2004

For ARTIFICIAL INTERVERTEBRAL DISC HAVING A BORED SEMISPHERICAL BEARING WITH A
COMPRESSION LOCKING POST AND RETAINING CAPS

Art Unit 3738

Examiner C. L. Miller

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above
identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

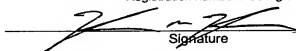
	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to
Deposit Account Number 12-1095. I have enclosed a duplicate copy of this sheet.I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 54,230☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34 _____



Signature

August 31, 2007

Date

Kevin M. Kocun

Typed or printed name

(908) 518-6383

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more
than one signature is required, see below.☐ Total of 1 forms are submitted.I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on
the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O.
Box 1450, Alexandria, VA 22313-1450.

Dated: August 31, 2007

Signature: 

(Kevin M. Kocun)